	101
181181	-115
See 2	
	1
4351261	1
44,534	eris.
2	
Hap	- FF
SESSES.	
Allthi	
Pinte	577
-	2 :

Please	tune	a nl	18	sian	( <del>+</del> )	inside	this	box	<b>→</b>	4	_
LIGGSE	Lype	a pi	us .	ayıı	(,,	1112100	HIIO	DOX			

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	SANDMAN MONIKA *
Title: A METHOD AND TOO	L FOR ASSIGNMENT OF ITEM
HUMBER BY MAPPING	-, OF CLASSIFICATION AND
GENERATION OF A DE	
Attorney Docket Number	URUSAN OI

I hereby appoint:						
☑ Practitio	ners at C	Sustomer Number		]	Number	
OR					Laberne	7460
Practition	ner(s) na	med below:				RADEMARK OFFICE
		Name			Registration Numb	er
				<u> </u>		
as my/our attor	ney(s) or	agent(s) to prosec	ute the application id	entified	above, and to trar	nsact all
			rademark Office con			
		espondence address led Customer Numb	s for the above-ident ner	шес ар	bucation to:	
OR	-11161111011	ea Gastomer Hami			Place Custor	mer
Practitione	ers at Cus	stomer Number			Number Bar	Code
OR						
Firm or Individual N	ame					
Address						
Address						
City				State	Zip	)
Country						
Telephone	Telephone Fax					
I am the:						
✓ Applicar	nt/invento	or.				
Assignee of record of the entire interest. See 37 CFR 3.71.						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Name MONIKA SAND MAN						
Signature	A ha					
Date						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
□ *Total of forms are submitted.						

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

	Attorney Docket Number	URUSAN 01		
DECLARATION FOR UTILITY OR	First Named Inventor	SANDMAN, Monika		
DESIGN PATENT APPLICATION	COMPLETE IF KNOWN			
(37 CFR 1.63)	Application Number			
✓ Declaration Declaration	Filing Date			
Submitted OR Submitted after Initial	Art Unit			
with Initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)	Examiner Name			

As the below named inventor, I here	eby declare that:					
My residence, mailing address, and cit	tizenship are as stated belo	w next to my name.				
I believe I am the original and first inve	entor of the subject matter w	hich is claimed and for which	h a patent is sough	nt on the invention entitled:		
A METHOD AND TOOL FOR ASSIGNMENT OF ITEM NUMBER BY MAPPING OF CLASSIFICATION AND GENERATION OF A DECISION TREE						
	(Title of the li	nvention)				
the specification of which	,	,				
is attached hereto				1		
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number and was amended on (MM/DD/YYYY) (if applicable).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
Additional foreign application nu	mbers are listed on a supple	emental priority data sheet I	PTO/SB/02B attach	ned hereto:		

[Page 1 of 2]

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code				OR Cor	respondence address below	
27460 PATENT_TRADEMARK OFFICE						
Address						
City			State		ZIP	
Country	Tele	phone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:		A petition h	as bee	en filed for this unsig	ned inventor	
Monika Given Name (first and middle [if any])	Given Name Family Name					
Inventor's Signature Date 127/02						
Cupertino		California	U.S.A.		U.S.A.	
Residence: City State Country Citizenship						
Mailing Address 20063 La Roda Court						
Cupertino		California		95014	U.S.A.	
City		State		ZIP	Country	
NAME OF SECOND INVENTOR:		A petition ha	s been	filed for this unsigne	ed inventor	
Given Name (first and middle [if any])  Family Name or Surname						
Inventor's Signature Date					Date	
Residence: City		State		Country	Citizenship	
Mailing Address						
City		State		ZIP	Country	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						